## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

Docket Number 13DV14194

As a below named inventor, I he	reby declare that:				<u> </u>		
My residence, post office addres	s, and citizenship are as	stated below next t	o my name.				
I believe I am the original, first an names are listed below) of the su	nd sole inventor (if only o ubject matter which is cla	ne name is listed b imed and for which	elow) or an original, first a patent is sought on th	and joint inventore invention entite	or (if plu led:	rai	
FIBER	IMBEDDED POLYMER	IC SPONGE					
the specification of which							
is attached hereto OR							
was filed on	as United States Ap	plication Number o	PCT International Appli	cation Number			
and was amended on I hereby state that I have reviewe	(if applicable	=	identified energification	inalization the of	aima		
any amendment specifically refer		intents of the above	identified specification,	including the ci	aims, as	s ame	enaea by
I acknowledge the duty to disclos	se information which is m	aterial to patentabi	ity as defined in Title 37	Code of Federa	ıl Regul	ation	s, §1.56.
I hereby claim foreign priority ber or inventor's certificate, or §365 ( States of America, listed below a	<ul> <li>a) of any PCT internation and have also identified b</li> </ul>	nal application whice elow any foreign ap	ch designated at least or opplication for patent or in	ne country other eventor's certification	than th	e Un	ited
international application having a PRIOR FOREIGN APPLICATION		the application on	wnich priority is claimed.	•	Priorit	y Cla	imed
(Number)	(Country)		(Day/Month/Year Fried)		Yes		No
A Committee				C	] Yes		No
(Number)  Additional foreign application n	Country) umbers are listed on a supp		(Day/Month/Year Filed) sheet attached hereto.				
I hereby claim the benefit under				al annlication(s)	lieted h	سمامه	,
Thereby claim the benefit under	rille 33, Ornied States Of	ode 9 i 19 (e) of ally	Officed States provision	Additional	provision	al ap	
(Application Number	·)	(Filing Date)	<del></del>	numbers a supplement attached h	ital priori		a sheet
I hereby claim the benefit under international application designaths application is not disclosed in fitle 35, United States Code § 37, Code of Federal Regulations international filing date of this applications.	ting the United States of in the prior United States 112, I acknowledge the §1.56 which became av	America, listed bel or PCT Internation duty to disclose in	ow and, insofar as the si al application in the mar ormation which is mater	ubject matter of nner provided by ial to patentabili	each of the firs ty as de	the of t para fined	agraph I in Title
(Application Numbe	<u> </u>	(Filing Date)	(Statu	s - patented, pe	nding, a	band	(benot
(Application Number	)	(Filing Date)	(Statu	s - patented, pe	nding, a	band	doned)
I hereby appoint the registere transact all business in the Pa				prosecute this	applica	ation	and to
Address all telephone calls to:	FRANCIS L. CON	ITE at	telephone number (78	81) 592-907	7		
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	6 Puritan Avenu Swampscott, MA		Para III Number III Lapa 8	<b>103</b> 10			_
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**CUSTOMER NUMBER:** 29827

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13DV14194	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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_	First Name	Middle Name		
_	First Name	Middle Name	Date	
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